SUBMIT: COMPLETED APPLICATION, TAX **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

**Property** 

Existing Structure: (if permit being applied for is relevant to it)

Length:

## **APPLICATION FOR PERMIT**



ENTERED Permit #: 8-0108 Date: **Amount Paid:** Keconnect Refund:

INCTRUCTIONS: No		a ava maid	Ravfield	Co. Zoning	Dept		24-34-3	1811			100	
INSTRUCTIONS: No permits will be issued until all fees are paid.  Checks are made payable to: Bayfield County Zoning Department.												
DO NOT START CONST	RUCTION UNTIL ALL PERMITS H	AVE BEEN ISSUED	TO APPLIC	ANT.								
TYPE OF PERMIT REQUESTED → 🗵 LAND USE 🗆 SANITARY 🗆 PRIVY 🗆 CONDITIONAL USE 🗆 SPECIAL USE 🗆 B.O.A. □ OTHER												
Owner's Name: Low D and Elizabeth			Mailing Address: City/State/Zip:								Telephone:	
		casein	Brule, WI 54820								715-815-0821	
Address of Property:	UDERSON		City/State/Zip:								Cell Phone:	
lolo4 lon .	Vills Rd		Hu	Hughs WI 715								
Contractor:	orns rea			tor Phone:	Plumk					Plumber Pl	hone:	
	erson Masona	ry INC	75-372-4921 Allan Policoski						715-372-4156			
	erson Signing Application on behalf		Agent P			Mailing Add	Iress (include City/	State/Zip):		Written Authorization		
										Attached  See No		
PROJECT			Tax ID#			Re			Recorded Document: (i.e. Proper			
PROJECT LOCATION  Legal Description: (Use Tax Statement)				18565	5		2012R 5		54	546500		
1.5	Gov't	Lot Lot(s)				Lot(s) No. Block(s) No.		Subdivision:				
<u>5E</u> 1/4, _	<u>5E 1/4, NE 1/4</u>   GOVIEST   ESTANDARIO   SOCIALISTA   SO											
19 117 9			Town of:				Lot Size			Acreage		
Section, TownshipN, Range				H	vgr	125			40	40		
a _ 1	☐ Is Property/Land within	300 feet of Riv	er Stream	n /incl Intermitter	nt) Di	stance Struc	cture is from Sho	reline :			Non-Markenska	
	Creek or Landward side o		continue —					is Pro feet Floodpl		Are Wetlands Present?		
☐ Shoreland →	☐ Is Property/Land within	1000 feet of La	ike. Pond or Flowage			Distance Structure is from Shorel				Yes	☐ Yes	
		If yescontinue -			feet			™No		<b>₹</b> No		
✓ Non-Shoreland												
^												
Value at Time					34	# of		What Ty	no of		Type of	
of Completion	Project	# of Storie	06	Foundation	be	edrooms	Sew	er/Sanita	•	m	Water	
* include donated time &	Project	# 01 31011		Touridation		in		on the pr			on	
material					S	tructure					property	
₩1	☐ New Construction	💢 1-Story		Basement	: 🗆	1	☐ Municipal/				☐ City	
Ś	XAddition/Alteration	☐ 1-Story +	Loft	☐ Foundation				tary Specify Type:			_	
206,000.00	☐ Conversion	☐ 2-Story		X Stab		3	X Sanitary (E	xists) Spe	cify Type:	DIEN FR	eld 0	
200,000	☐ Relocate (existing bldg)						☐ <b>Privy (Pit)</b> or ☐ <b>Vaulted</b> (min 200 gallon)			1)		
	☐ Run a Business on			Use		None	☐ Portable (v	/service co	ntract)			

Proposed Construction:	Length: 70' Width: 30	,		Height:	16'	
Proposed Use	1	Proposed Structure	Dimensions			Square Footage
		Principal Structure (first structure on property)	(		X 60)	e 10
	Residence (i.e. cabin, hunting shack, etc.)					1800
		with Loft	(		X )	
Residential Use		with a Porch	(	10	x 30 )	300
Rec'd for Issuar	ice	with (2 <sup>nd</sup> ) Porch	(		X )	
		with a Deck	(		X )	
APR 17 2018		with (2 <sup>nd</sup> ) Deck	(		X )	
☐ Commercial Use		with Attached Garage	(		х )	
Secretarial Staff		<b>Bunkhouse</b> w/ ( $\square$ sanitary, or $\square$ sleeping quarters, or $\square$ cooking & food prep facilities)	(		x )	
		Mobile Home (manufactured date)	(		x )	
		Addition/Alteration (specify)	(		x )	
☐ Municipal Use		Accessory Building (specify)	(		X )	
		Accessory Building Addition/Alteration (specify)	(		X )	
2						
		Special Use: (explain)	(		х )	
		Conditional Use: (explain)	(		х )	
		Other: (explain)	(		х )	

X Year Round

**Compost Toilet** 

None

Width:

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described

property at any reasonable time for the purpose of inspection.			1	1
Owner(s):	Date _	3	5	13
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)				
Authorized Agent:	Date _			
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)				

Attach **Copy of Tax Statement** 

Height:

raw or Sketch your Property (regardless of what you are applying for)

Show Location of: Show / Indicate:

**Proposed Construction** 

(2) Show Location of (\*): (3)

North (N) on Plot Plan

Show: (4)

(\*) Driveway and (\*) Frontage Road (Name Frontage Road)

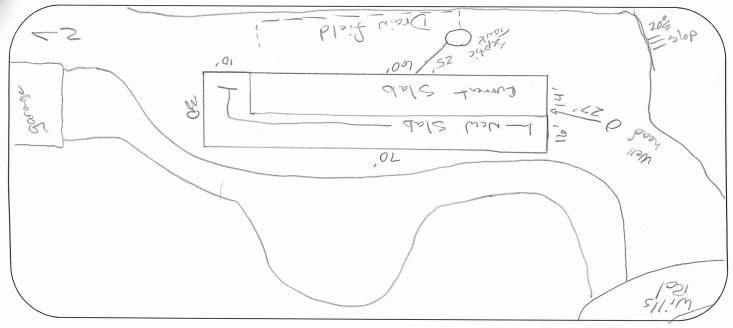
(5) Show: All Existing Structures on your Property

Show any (\*): (6)

 $(*) \ \textbf{Well (W);} \ (*) \ \textbf{Septic Tank (ST);} \ (*) \ \textbf{Drain Field (DF);} \ (*) \ \textbf{Holding Tank (HT)} \ \text{and/or} \ (*) \ \textbf{Privy (P)}$ 

(\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond

(7)Show any (\*): (\*) Wetlands; or (\*) Slopes over 20%



## Please complete (1) – (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement			Description	Measurement		
Setback from the <b>Centerline of Platted Road</b>	175	Feet	T	Setback from the <b>Lake</b> (ordinary high-water mark)	-	Feet	
Setback from the Established Right-of-Way	150"	Feet		Setback from the River, Stream, Creek	_	Feet	
				Setback from the Bank or Bluff		Feet	
Setback from the <b>North</b> Lot Line	12001	Feet				-	
Setback from the <b>South</b> Lot Line	100'	Feet		Setback from <b>Wetland</b>	_	Feet	
Setback from the <b>West</b> Lot Line	100	Feet		20% Slope Area on the property	XYes	□ No	
Setback from the <b>East</b> Lot Line	1200!	Feet	Į.	Elevation of Floodplain		Feet	
Setback to <b>Septic Tank</b> or <b>Holding Tank</b>	25	Feet		Setback to Well	27	Feet	
Setback to <b>Drain Field</b>	7.51	Feet					
Setback to <b>Privy</b> (Portable, Composting)	, 9	Feet	7				

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: <u>ALL</u> Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number: 36	7379	# of bedrooms: 3	Sanitary Date: 9/18/00					
Permit Denied (Date):	Reason for Denial:								
Permit #: 18-0108	Permit Date: 4-17-18								
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming    Yes (Deed of Recor   Yes (Fused/Contigue)   Yes   Yes	ous Lot(s))	Mitigation Required Mitigation Attached		Affidavit Required Affidavit Attached	☐ Yes ☐ No ☐ Yes ☐ No				
Granted by Variance (B.O.A.)  ☐ Yes ☐ No Case #:		Previously Granted by Variance (B.O.A.)  ☐ Yes ☐ No Case #:							
Was Parcel Legally Created Was Proposed Building Site Delineated Yes No			es Represented by Owner Was Property Surveyed						
appears to be to be Compiler.	1. 0 k to 1	SSUE L.U.	pemit.	Zoning District Lakes Classification	(RI)				
Date of Inspection: 3/14/18	Inspected by:	bort Schierman Date of Re-Inspection:			tion:				
Condition(s): Town, Committee or Board Conditions Atta  Must Content local Unifor  Permit es required by	a Dwelling C	ode inspec	ached.) I a Jener	y and Sec	ore Bully				
Signature of Inspector:				Date of Appro	val: 3 14 10				
Hold For Sanitary: Hold For TBA:	Hold For Affid	davit: 🗆	Hold For Fees:	□					

<sub>city</sub>, Village, State or Federal May Also Be Required

ND USE - X SANITARY - Reconnect 367379 SIGN -SPECIAL -CONDITIONAL -BOA -

## **BAYFIELD COUNTY** PERMIT

**WEATHERIZE AND POST THIS PERMIT** ON THE PREMISES DURING CONSTUCTION

Issued To: Lon & Elizabeth Anderson 18-0108 No. Hughes W. Town of Range 9 Township N. Section 19 SE NE Location: 1∕₄ of CSM# Subdivision Block Lot Gov't Lot

For: Residential Use: [ 1- Story; Residence (30' x 60') = 1,800 sq. ft.; Porch (10' x 30') = 300 sq. ft.] Total Overall = 2,100 sq. ft.

(Disclaimer): Any future expansions or development would require additional permitting

Condition(s): Must contact local uniform dwelling code inspection agency and secure building permit as required by State Statute.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

> Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

## **Rob Schierman**

**Authorized Issuing Official** 

**April 17, 2018** 

Date